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24011	7590 01/24	/2007				
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	R Z	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/693,707 10/20/2000		Kia Silverbrook		BGA04US	7404	
TITLE OF INVENTION	: INTEĠRATED CIRCU	JIT CARRIER WITH RE	ECESSES			
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	XES	\$7,000	\$0	\$0	\$700	04/24/2007
EXAM	INER	ART UNIT	CLASS-SUBCLASS			
POTTER, ROY KARL		2822	257-676000		•	
. Change of correspondence address or indication of "Fee Address" (37 FR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Balmain, NSW, Australia  Silverbrook Research Pty Ltd  lease check the appropriate assignee category or categories (will not be printed on the patent):   Individual Corporation or other private group entity   Government						
☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number SCHOHA (enclose an extra copy of this form).			
_ 5	t <b>us</b> (from status indicated s SMALL ENTITY statu		h. Applicant is no lor	nger claiming SMALL	ENTITY status. See 37 C	FR 1 27(a)(2)
OTE: The Issue Fee and	I Publication Fee (if requ		d from anyone other than			ne assignee or other party in
Authorized Signature			Date 14 FEBRUARY 2007			
Typed or printed name KIA SILVERBROOK Registration No.						
iexandria, virginia 225	13-1430.				public which is to file (annutes to complete, including ments on the amount of tirademark Office, U.S. Dept END TO: Commissioner plays a valid OMB control	by the USPTO to process) g gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450, number.